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(Depositor's name) (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/612.249	07/01/2003	Tetsuva Ishiguro	APW-020	3356

TITLE OF INVENTION: FAILURE DIAGNOSIS APPARATUS FOR THROTTLE VALVE ACTUATING DEVICE

APPLN. TYPE	N. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE		SMALL ENTITY ISSUE FEE PUBLIC		SMALL ENTITY ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/16/2004			
EXA	MINER	ART UNIT	CLASS-SUBCLASS					
KWO	N, JOHN	3747	123-396000	_				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		Correspondence	2. For printing on the patent front pagnames of up to 3 registered patent agents OR, alternatively, (2) the name firm (having as a member a registere agent) and the names of up to 2 regattorneys or agents. If no name is list will be printed.	attorneys or a lahive the of a single attorney or istered patent	& Cockfield, I			

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)

(A) NAME OF ASSIGNEE

Tokyo, Japan Honda Giken Kogyo Kabushiki Kaisha Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): X Issue Fee ☐ A check in the amount of the fee(s) is enclosed. M Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached. 10 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-0080 (enclose an extra copy of this form). Advance Order - # of Copies __

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Authorized	Signa	rre)	. 7	144.		NT -	(Date)		
Anthor	WI	M744		untahi entano	Mageg	20·	August	5,	2004
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der the Paperwork Reduction Act of 1995, no persons are required to res	pond to a collection of information	n unless it displays a valid OMB control numbe
	Application Number	10/612249-Conf. #3356

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/612249-Conf. #3356
Filing Date	July 1, 2003
First Named Inventor	Tetsuya ISHIGURO
Art Unit	3747
Examiner Name	J. Kwon
Attorney Docket Number	APW-020

	EN	ICLOSURES (Check all that app	oly)		
X Fee Transr	mittal Form	Drawing(s)	After Allowance communication to Technology Center (TC)		
Fee /	Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences		
Amendmer	nt/Reply	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After	Final	Petition to Convert to a Provisional Application	Proprietary Information		
Affida	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter		
Extension	of Time Request	Terminal Disclaimer	X Other Enclosure(s) (please Identify below):		
Express Ab	pandonment Request	Request for Refund	Certificate of Express Mail (1 page) PTOL-85 Part B Fee Transmittal (1 page)		
Information Disclosure Statement		CD, Number of CD(s)	Return Receipt Postcard		
Certified Co	opy of Priority s)				
	to Missing Parts/ Application	Remarks			
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unde	1 37 31 10 1.32 31 1.33				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm or Individual name	LAHIVE & COCKFIE Anthony A. Laurenta				
Signature	Authory) winter lais			
Date	August 5, 2004				

US, in an envelope addressed to: MS Is	sue Fee, Commissioner for Paten	Postal Service as Express Mail, Airbill No. EL 982 741 42 nts, P.O. Box 1450, Alexandria, VA 22313-1450, on the	
shown below. Dated: August 5, 2004	Signature: Autom	(Anthony A. Laurentano)	

plication No. (if known): 10/612249

Attorney Docket No.: APW-020

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FEE	TR	AN	SMI	TT	AL
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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known					
Application Number	10/612249-Conf. #3356				
Filing Date	July 1, 2003				
First Named Inventor	Tetsuya ISHIGURO				
Examiner Name	J. Kwon				
Art Unit	3747				
Attorney Docket No.	APW-020				

METHOD OF DAYMENT (check all that apply)					CALCULATION (continued)	
METHOD OF PAYMENT (check all that apply)	 			FEE	CALCULATION (continued)	
Check Credit Money Other None None	3. A	DDITI	ONAL	FEES	;	
X Deposit Account:		_				
Deposit 40,0000	Fee	Entity Fee	Small Fee	Entity	-	
Account Number 12-0080	Code	(\$)	Code	(\$)	Fee Description	Fee Paid
Deposit						
Account Lahive & Cockfield, LLP	1051	130	2051	65	Surcharge – late filing fee or oath	\sqcup
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		
Credit any overpayments					Non-English specification	\vdash
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	= :	
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Description publication of CID offer	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255	1.005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	\vdash
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	•	
' 	1452	110	2452	55	Petition to revive – unavoidable	
SUBTOTAL (1) (\$) 0.00	1453	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	1,330.00
Extra Fee from Claims below Fee Paid	1502	480	2502	240	Design issue fee	
Total Claims 18 -20** = x = 0.00	1503	640	2503	320	Plant issue fee	
Independent 3 -3** = x = 0.00	1460	130	1460	130	Petitions to the Commissioner	
Claims 5.30	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a submission after final rejection	\vdash
1201 86 2201 43 Independent claims in excess of 3	''''				(37 CFR 1.129(a)) For each additional invention to be	<u> </u>
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	examined (37CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385	Request for Continued Examination (RCE)	
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for expedited examination of a design application	
and over original patent			'	8001:	Printed copy of patent w/o color; Publication	
	Other	fee (spe	cify)	1504	fee for early, voluntary, or normal publication	330.00
SUBTOTAL (2) (\$) 0.00	*Redi	iced by E	Basic Fi	lina Fee	<u> </u>	1,660.00
**or number previously paid, if greater; For Reissues, see above					(4) (4)	
SUBMITTED BY					(Complete (if applicable))	
=					(Oottipicto (ii applicable))	

SUBMITTED BY				(Complete	(if applicable))
Name (Print/Type)	Anthony A. Layrentano	Registration No. (Attorney/Agent)	38,220	Telephone	(617) 227-7400
Signature	Authory !	aintertorio	- -	Date	August 5, 2004

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Dated: August 5, 2004

Signature: An Thory June (Anthony A. Laurentano)